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Bib Data Sheet

CONFIRMATION NO. 2821

|  |   |                               |   |                                      |
|--|---|-------------------------------|---|--------------------------------------|
| <b>SERIAL NUMBER</b><br>10/506,395   | <b>FILING OR 371(c) DATE</b><br>09/01/2004<br><b>RULE</b>   | <b>CLASS</b><br>514           | <b>GROUP ART UNIT</b><br>1614   | <b>ATTORNEY DOCKET NO.</b><br>21041P |
| <b>APPLICANTS</b><br>Tung M Fong, Somerset, NJ;<br>Leonardus H. T. Van Der Ploeg, Scotch Plains, NJ;   |   |                               |   |                                      |
| <b>** CONTINUING DATA *****</b><br>This application is a 371 of PCT/US03/06031 02/28/2003<br>which claims benefit of 60/362,275 03/06/2002   |   |                               |   |                                      |
| <b>** FOREIGN APPLICATIONS *****</b>   |   |                               |   |                                      |
| Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no<br>35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance<br>Verified and Acknowledged _____<br>Examiner's Signature _____ Initials _____ |   | <b>STATE OR COUNTRY</b><br>NJ | <b>SHEETS DRAWING</b>   | <b>TOTAL CLAIMS</b><br>28            |
| <b>INDEPENDENT CLAIMS</b><br>4   |   |                               |   |                                      |
| <b>ADDRESS</b><br>000210   |   |                               |   |                                      |
| <b>TITLE</b><br>Method of treatment or prevention of obesity   |   |                               |   |                                      |
| <b>FILING FEE RECEIVED</b><br>330  | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |                               | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |                                      |